

REMARKS

Claims 74-80, 82, 84-89 are pending. Claims 74-76, 80, 84, 85 and 88 are amended. No new matter is entered.

Claims 74-80, 82 and 84-89 stand rejected under 35 U.S.C. § 112 as failing to comply with the written description requirement. The rejection is respectfully traversed in light of the amendments herein and for the reasons provided below.

With respect to claim 74, the office action asserts that the following phrases are not recited in the original disclosure.

“System factors reflecting a potential medical importance of a symptom.” Claim 74 is amended as follows: the phrase ‘system factors’ has been replaced by ‘system criteria’ and ‘medical importance’ has been replaced by ‘clinical importance’. Support for the replacement phrases can be found, for example, at page 65, line 15-17: “In addition, certain system criteria apply that automatically elevate some problems to high priority based on clinical importance, such as new onset chest discomfort, progressive difficulty swallowing, or blood in the stool.”

“Intranet” and “local area network” have been deleted in amended claim 74.

With respect to claim 75, the following phrases are alleged in the Office Action to not be included in the original disclosure.

“Index symptom(s).” The phrase ‘index symptom(s)’ has been replaced by ‘index complaint’ in amended claim 75. The phrase ‘index complaint’ appears in original disclosure, for example at page 43, lines 6-7: “To fully elucidate these problems, all of the screening questions are asked pertaining to the index complaint.”

“Redundant characterization of detail is skipped.” This phrase has been replaced by “no further characterization will be performed.” See, e.g., page 56, lines 9-10: “If symptoms are the same, no further characterization will be performed,” and FIG. 7C.

With respect to claim 76, the following phrases are alleged in the Office Action to not be included in the original disclosure. Comments and citations to the specification describing such phrases are provided below:

“Panic.” Panic has been deleted from amended claim 76.

“Somatoform disorder.” This phrase has been replaced in amended claim 76 by ‘somatization’ which appears, for example, at page 64, lines 4-13:

As described previously, the review of systems (FIG. 6) captures physical symptoms in several organ systems that may suggest somatization, a psychologic condition that can distract clinicians until recognized. At test block 1080, Boolean tests are performed to determine if sufficient criteria for somatization from the Diagnostic and Statistical Manual of Mental Diseases Fourth Edition (DSM-IV) are met. Symptoms that suggest somatization are recorded and presented to the physician in the CPM patient assessment report. Responses are summarized and presented to patients for confirmation, block 1085.

With respect to claim 80, the element *“successive interviews of said patient to reflect changes in severity over time”* is alleged in the Office Action to not be included in the original disclosure. Amended claim 80 replaces the term ‘severity’ with ‘status’. This term is supported, for example at page 76, line 3-22:

Several response options are offered including items such as new symptoms (block 1520), change in status, concern or follow-up regarding a known problem (block 1540), or routine visit (block 1545)... If the reason is follow-up or change in status of a known problem, or a routine follow-up evaluation, the patient's previous problem list with brief descriptions is presented, block 1550...When problems are confirmed, changes in status of each problem will be sought, block 1565.

With respect to claim 84, the following phrases are alleged in the Office Action to not be included in the original disclosure.

"Prognostic importance." This phrase has been deleted in amended claim 84.

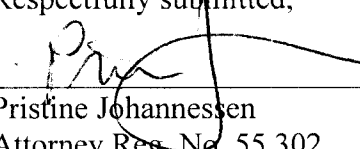
"Visceral or somatic sensation" and *visceral or somatic sensitization."* These phrases have been replaced by 'cross-referral and sensitization of nerves from the viscera and body wall,' which is supported, for example at page 54, lines 19-21: "Cross referral and sensitization is common due to the convergence of the nerves to the viscera and body wall in the spinal cord and brain."

In light of the above amendments, Applicants respectfully submit that all claim rejections have been overcome and that all pending claims are in condition for allowance.

No fee is believed due in connection with this Response. However, if any fee is required, please charge such fee to Deposit Account No. 50-0310.

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Respectfully submitted,



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